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Bib Data Sheet

CONFIRMATION NO. 9216

<b>SERIAL NUMBER</b> 09/491,902	<b>FILING OR 371(c) DATE</b> 01/27/2000 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2655	<b>ATTORNEY DOCKET NO.</b> IBM/116	
<b>APPLICANTS</b> Cary Lee Bates, Rochester, MN; Paul Reuben Day, Rochester, MN; John Matthew Santosuosso, Rochester, MN;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/27/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> 29053					
<b>TITLE</b> Automated detection of spoken numbers in voice messages					
<b>FILING FEE RECEIVED</b> 1050	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>SERIAL NUMBER</b> 09/491,902	<b>FILING DATE</b> 01/27/2000 <b>RULE</b> -	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2741	<b>ATTORNEY DOCKET NO.</b> IBM/116	
<b>APPLICANTS</b> Cary Lee Bates, Rochester, MN ; Paul Reuben Day, Rochester, MN ; John Matthew Santosuosso, Rochester, MN ;					
<b>** CONTINUING DATA *****</b> <i>None D.A</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None D.A</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/27/2000 -					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>DA</i> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 27	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> Scott A Stinebruner Wood Herron & Evans LLP 2700 Carew Tower 441 Vine Street Cincinnati, OH 45202-2917					
<b>TITLE</b> Automated detection of spoken numbers in voice messages					
<b>FILING FEE RECEIVED</b> 1050	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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<b>ADDRESS</b> SCOTT A. STINEBRUNER WOOD HERRON & EVANS LLP 2700 CAREW TOWER 441 VINE STREET CINCINNATI, OH 45202-2917				
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